

Initial Application Date: 5-30-13

Application # 1350031407

CU# _____

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION
Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 ext:2 Fax: (910) 893-2793 www.harnett.org/permits

****A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION****

LANDOWNER: Harnett Land group Mailing Address: Po Box 985
City: Mumfres State: NC Zip: _____ Contact No: 910 984 6765 Email: _____

APPLICANT*: Kenneth Cummings Mailing Address: 630 Griffin RD
City: Lillington State: NC Zip: 27546 Contact No: 910 984 6765 Email: _____
*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Kenneth Cummings Phone # 910 984 6765

PROPERTY LOCATION: Subdivision: Tiger point Lot #: ~~236~~ 127 Lot Size: .39
State Road # 27W State Road Name: _____ Map Book & Page: 2012, 86
Parcel: 03 9576 01 0088 31 PIN: 9697-32-9763,000
Zoning: R20P Flood Zone: X Watershed: NA Deed Book & Page: 2257 94 Power Company*: _____

*New structures with Progress Energy as service provider need to supply premise number _____ from Progress Energy.

PROPOSED USE:

- SFD: (Size 52 x 45) # Bedrooms: 3 # Baths: 2 Basement(w/wo bath): _____ Garage: Deck: _____ Crawl Space: _____ Slab: Slab: Monolithic
(Is the bonus room finished? yes no w/ a closet? yes no (if yes add in with # bedrooms)
- Mod: (Size _____ x _____) # Bedrooms _____ # Baths _____ Basement (w/wo bath) _____ Garage: _____ Site Built Deck: _____ On Frame _____ Off Frame _____
(Is the second floor finished? yes no Any other site built additions? yes no
- Manufactured Home: _____ SW _____ DW _____ TW (Size _____ x _____) # Bedrooms: _____ Garage: _____ (site built? _____) Deck: _____ (site built? _____)
- Duplex: (Size _____ x _____) No. Buildings: _____ No. Bedrooms Per Unit: _____
- Home Occupation: # Rooms: _____ Use: _____ Hours of Operation: _____ #Employees: _____
- Addition/Accessory/Other: (Size _____ x _____) Use: _____ Closets in addition? yes no

Water Supply: County _____ Existing Well _____ New Well (# of dwellings using well _____) ***Must have operable water before final**

Sewage Supply: New Septic Tank (Complete Checklist) _____ Existing Septic Tank (Complete Checklist) _____ County Sewer

Does owner of this tract of land, own land that contains a manufactured home within five hundred feet (500') of tract listed above? yes no

Does the property contain any easements whether underground or overhead yes no

Structures (existing or proposed): Single family dwellings: Manufactured Homes: _____ Other (specify): _____

Required Residential Property Line Setbacks:

Front	<u>Actual 39 Min 35</u>	_____
Rear	<u>92.5</u>	<u>25</u>
Closest Side	<u>17.9</u>	<u>10</u>
Sidestreet/corner lot	<u>18</u>	_____
Nearest Building on same lot	<u>30</u>	_____

Comments: _____

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: Hwy 27 west to
 Tiger point to L. Jane Drive lot on left

If permits are granted I agree to conform to all ordinances and laws of the State of North Carolina regulating such work and the specifications of plans submitted. I hereby state that foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is provided.

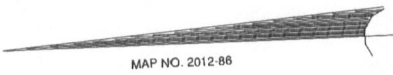
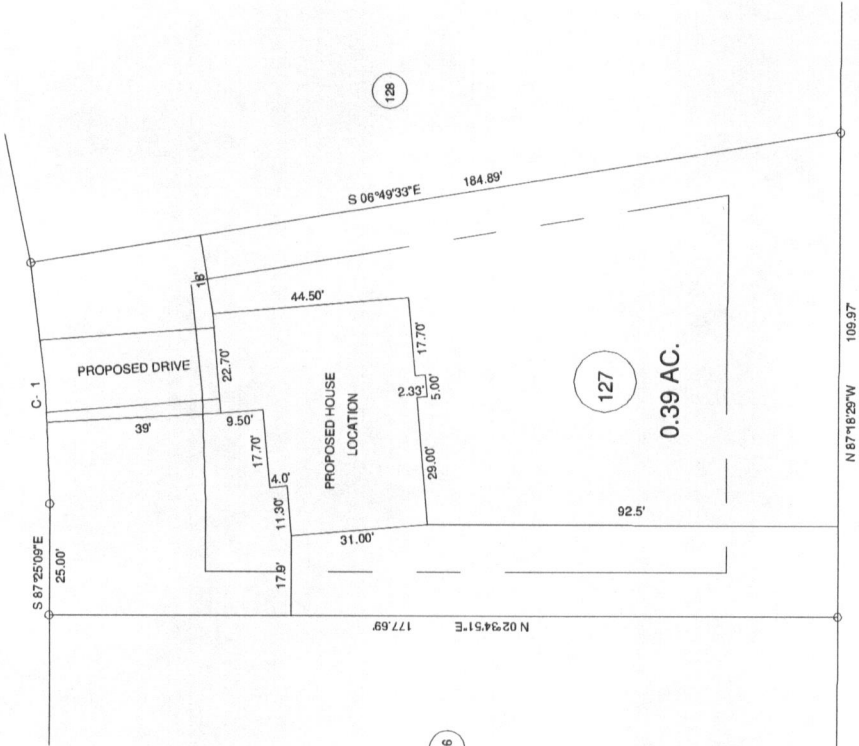
[Signature]
Signature of Owner or Owner's Agent

4-25-13
Date

It is the owner/applicants responsibility to provide the county with any applicable information about the subject property, including but not limited to: boundary information, house location, underground or overhead easements, etc. The county or its employees are not responsible for any incorrect or missing information that is contained within these applications.

This application expires 6 months from the initial date if permits have not been issued

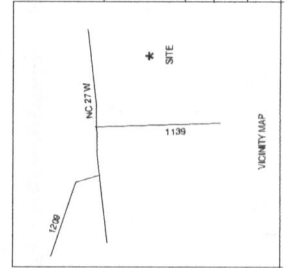
"JUNO DRIVE" 50' R/W



SITE PLAN APPROVAL SFD
DISTRICT RA20R USE SFD
#BEDROOMS 3
5-30-13
V.C.M.
 Zoning Administrator
 Date

MAP REFERENCE: MAP NO. 2012-86

MINIMUM BUILDING SET BACKS
 FRONT YARD 35'
 REAR YARD 25'
 SIDE YARD 10'
 CORNER LOT REAR YARD 20'
 MAXIMUM HEIGHT 35'



TOWNSHIP BARBEQUE COUNTY HARNETT
 STATE: NORTH CAROLINA DATE: MAY 29, 2013
 ZONE RA-20R WATERSHED DISTRICT TAX PARCEL ID#

PROPOSED PLOT PLAN - LOT - 127
 TINGEN POINTE S/D, PHASE - 5

—SURVEY FOR—
BENNETT SURVEYS
 1882 CLARK RD, LILLINGTON, N.C. 27566
 (910) 883-5252

20' 0 40' SURVEYED BY: RVB
 SCALE: 1"= 40' DRAWN BY: RVB
 CHECKED & CLOSURE BY: RVB
 FIELD BOOK
 DRAWING NO
 13209

NAME: Kenneth Cummings

APPLICATION #: _____

This application to be filled out when applying for a septic system inspection.

County Health Department Application for Improvement Permit and/or Authorization to Construct

IF THE INFORMATION IN THIS APPLICATION IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE IMPROVEMENT PERMIT OR AUTHORIZATION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either 60 months or without expiration depending upon documentation submitted. (Complete site plan = 60 months; Complete plat = without expiration)

910-893-7525 option 1

CONFIRMATION # _____

Environmental Health New Septic System Code 800

- **All property irons must be made visible.** Place "pink property flags" on each corner iron of lot. All property lines must be clearly flagged approximately every 50 feet between corners.
- Place "orange house corner flags" at each corner of the proposed structure. Also flag driveways, garages, decks, out buildings, swimming pools, etc. Place flags per site plan developed at/for Central Permitting.
- Place orange Environmental Health card in location that is easily viewed from road to assist in locating property.
- If property is thickly wooded, Environmental Health requires that you clean out the **undergrowth** to allow the soil evaluation to be performed. Inspectors should be able to walk freely around site. **Do not grade property.**
- **All lots to be addressed within 10 business days after confirmation. \$25.00 return trip fee may be incurred for failure to uncover outlet lid, mark house corners and property lines, etc. once lot confirmed ready.**
- After preparing proposed site call the voice permitting system at 910-893-7525 option 1 to schedule and use code **800** (after selecting notification permit if multiple permits exist) for Environmental Health inspection. Please note confirmation number given at end of recording for proof of request.
- Use Click2Gov or IVR to verify results. Once approved, proceed to Central Permitting for permits.

Environmental Health Existing Tank Inspections Code 800

- Follow above instructions for placing flags and card on property.
- Prepare for inspection by removing soil over **outlet end** of tank as diagram indicates, and lift lid straight up (*if possible*) and then **put lid back in place.** (Unless inspection is for a septic tank in a mobile home park)
- **DO NOT LEAVE LIDS OFF OF SEPTIC TANK**
- After uncovering **outlet end** call the voice permitting system at 910-893-7525 option 1 & select notification permit if multiple permits, then use code **800** for Environmental Health inspection. Please note confirmation number given at end of recording for proof of request.
- Use Click2Gov or IVR to hear results. Once approved, proceed to Central Permitting for remaining permits.

SEPTIC

If applying for authorization to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.

{ } Accepted { } Innovative { } Conventional { } Any
 { } Alternative { } Other _____

The applicant shall notify the local health department upon submittal of this application if any of the following apply to the property in question. If the answer is "yes", applicant **MUST ATTACH SUPPORTING DOCUMENTATION**:

- { } YES { } NO Does the site contain any Jurisdictional Wetlands?
- { } YES { } NO Do you plan to have an irrigation system now or in the future?
- { } YES { } NO Does or will the building contain any drains? Please explain. _____
- { } YES { } NO Are there any existing wells, springs, waterlines or Wastewater Systems on this property?
- { } YES { } NO Is any wastewater going to be generated on the site other than domestic sewage?
- { } YES { } NO Is the site subject to approval by any other Public Agency?
- { } YES { } NO Are there any Easements or Right of Ways on this property?
- { } YES { } NO Does the site contain any existing water, cable, phone or underground electric lines?
- If yes please call No Cuts at 800-632-4949 to locate the lines. This is a free service.

I Have Read This Application And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And State Officials Are Granted Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules. I Understand That I Am Solely Responsible For The Proper Identification And Labeling Of All Property Lines And Corners And Making The Site Accessible So That A Complete Site Evaluation Can Be Performed.

Kenneth Cummings
 PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

4-29-17
 DATE

Harnett County Central Permitting
PO Box 85 Lillington NC 27548
910 893 7525 Fax 910 893 2793 www.harnett.org/permits

Each section below to be filled out
by whomever performing work
Must be owner or licensed
contractor Address company
name & phone must match

Application for Residential Building and Trades Permit

Owner's Name Kenneth Cummings Date 6-5-13
Site Address Lot 172 June Dr Phone 910 984 6765
Directions to job site from Lillington Hwy 27 west to Tiger
 to L. June lot 172

Subdivision Tiger point Lot 172
Description of Proposed Work New House # of Bedrooms _____
Heated SF 1742 Unheated SF 542 Finished Bonus Room? Crawl Space _____ Slab

General Contractor Information

CEBC Const Inc Telephone 910 984 6765
Building Contractor's Company Name
676 Friedin Dr Lillington NC 2754
Address
14856
License #

Electrical Permit Information

Description of Work New House Service Size: 200 Amps TPole: yes/no
JM Pope Elect Telephone 910 890-3655
Electrical Contractor's Company Name
3483 Cameron Dr. License # 40770
Address
James M. Pope #
Signature of Officer(s) of Corporation

Mechanical Permit Information

Description of Work New House
Carolina Comfort Air Telephone 919 333 4320
Mechanical Contractor's Company Name
5212 US 70 W Clayton NC 27520 License # H3-29077
Address
Phillip Powell
Signature of Officer(s) of Corporation

Plumbing Permit Information

Description of Work New House # Baths _____
Jamie Johnson Plumbing Telephone 910 984 6277
Plumbing Contractor's Company Name
1490 Clark Rd Lillington NC 27546 License # 21649
Address
Jamie Johnson
Signature of Officer(s) of Corporation

Insulation Permit Information

Stuart D. Te Telephone _____
Insulation Contractor's Company Name & Address

*NOTE General Contractor must fill out and sign the second page of this application

I hereby certify that I have the authority to make necessary application that the application is correct and that the construction will conform to the regulations in the Building Electrical Plumbing and Mechanical codes and the Harnett County Zoning Ordinance I state the information on the above contractors is correct as known to me and that by signing below I have obtained all subcontractors permission to obtain these permits and if any changes occur including listed contractors site plan number of bedrooms building and trade plans Environmental Health permit changes or proposed use changes I certify it is my responsibility to notify the Harnett County Central Permitting Department of any and all changes

EXPIRED PERMIT FEES - 6 Months to 2 years permit re-issue fee is \$150 00 After 2 years re-issue fee is as per current fee schedule

King & Co
Signature of Owner/Contractor/Officer(s) of Corporation

6-5-13
Date

Affidavit for Worker's Compensation N C G S 87-14

The undersigned applicant being the

General Contractor Owner Officer/Agent of the Contractor or Owner

Do hereby confirm under penalties of perjury that the person(s) firm(s) or corporation(s) performing the work set forth in the permit

Has three (3) or more employees and has obtained workers compensation insurance to cover them

Has one (1) or more subcontractors(s) and has obtained workers compensation insurance to cover them

Has one (1) or more subcontractors(s) who has their own policy of workers compensation insurance covering themselves

Has no more than two (2) employees and no subcontractors

While working on the project for which this permit is sought it is understood that the Central Permitting Department issuing the permit may require certificates of coverage of worker s compensation insurance prior to issuance of the permit and at any time during the permitted work from any person firm or corporation carrying out the work

Company or Name CEBCO Const Co

Sign w/Title *King & Co* Date 6-5-13